PATENT APPLICATION FEE DETERMINATION RECORD

Efféctive October 1, 2003

Application or Docket Number

10698976

	· · · · · · · · · · · · · · · · · · ·	. ====	tive Octor	190500								
		CLAIMS A	S FILED -			ımn 2)	••	MALL E	NTITY	OR	OTHER SMALL	
TOTAL CLAIMS			12					RATE	FEE		RATE	FEE
F(OR .	NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	385.00	OR	BASIC FEE	770.00°	
TO	OTAL CHARGE	ABLE CLAIMS	12 minus 20=		·			X\$ 9=	·	OR	X\$18=	
INE	DEPENDENT C	LAIMS	· minus 3 =		•			X43=	·	OR	X86=	• ,
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=	
* (f	the difference	e in column 1 is	less than ze	ess than zero, enter "0" in column 2			. •	TOTAL		OR	TOTAL	770.00
•	C		MENDED	MENDED - PART II				OTHER THAN SMALL ENTITY OR SMALL ENTITY				
ENTA	5/24/01	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	· .	(Colun HIGHI NUME PREVIO PAID F	EST BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	1	RATE	ADDI- TIONAL FEE
AMENDMEN	Total	. 16	Minus	** 21) ·	= ()		X\$ 9=		OR	X\$18=	
AME	Independent	. /	Minus	*** 3	01.414	=		X43≃		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	290=	
							L AD	TOTAL DIT. FEE		OR/	TOTAL ADDIT. FEE	
		(Column 1)	•	(Colum	nn 2)	(Column 3)				_		
ENT 8		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT . EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total _	•	Minus	**	•	=	;	X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***	C1 A444	=		X43=		OR	X86=	
	rinsi PHESE	NTATION OF MU	JETIPLE DEP	ENUENI	CLAIM		+	145=		OR	+290=	
♥. .	•						ADI	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	n 2)	(Column 3)						
AMENDMENI C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	4-4 ·	•	=	>	(\$ 9=		OR	X\$18=	
L MILL	Independent	*	Minus	4·4·*		=	,	<43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM		-	145=			+290=	
* If the entry in column 1 is tess than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								TOTAL		OR (TOTAL	
	the Highest Nur	nber Previously Pai nber Previously Pa ber Previously Paid	id For IN THIS				, .00	IT. FEE L		,-·· p	DOIT. FEE L	